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Bib Data Sheet

CONFIRMATION NO. 8626

<b>SERIAL NUMBER</b> 10/047,601	<b>FILING DATE</b> 01/14/2002 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> END-810	
<b>APPLICANTS</b> Jeffrey D. Messerly, Cincinnati, OH;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/957,174 09/20/2001 WHICH IS A CON OF 09/412,257 10/05/1999 PAT 6,325,811					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/28/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i>		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 000027777					
<b>TITLE</b> Blades with functional balance asymmetries for use with ultrasonic surgical instruments					
<b>FILING FEE RECEIVED</b> 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		